

North Carolina Medicaid
Pharmacy Prior Authorization Program for Proton Pump Inhibitors
Frequently Asked Questions (FAQS)
Effective June 1, 2007
Updated February 8, 2008

1. What medications require PA under this program?

The proton pump inhibitor medications Aciphex, Nexium, Prevacid, Prilosec, Protonix, **Pantoprazole** and Zegerid.

2. Do generic omeprazole and Prilosec OTC require PA under this program?

No, neither of these medications require prior authorization.

3. Are any recipients exempt from the PA requirement?

Recipients who are pregnant, breastfeeding or who are less than 6 years of age are exempt from PA for these medications.

4. Can the PA be overridden at the pharmacy?

Yes, the pharmacist can override the PA edit at point-of-sale.

5. What are the instructions for the pharmacist to override the PA edit for these medications?

One of the following phrases must be written on the face of the prescription in the prescriber's own handwriting for the pharmacist to override the PA edit:

1. "Failed omeprazole 40mg for 30 days"
2. "Esophagitis Grade C" (for esomeprazole magnesium (Nexium) 40mg prescriptions only)
3. "Esophagitis Grade D" (for esomeprazole magnesium (Nexium) 40mg prescriptions only)
4. "Cannot swallow tablets"
5. "Cannot swallow capsules"

If the proton pump inhibitor medication has a generic version available, "medically necessary" must also be written on the face of the prescription in the prescriber's own handwriting in order to dispense the brand name drug.

7. What override codes does the pharmacist use to override the PA edit for these medications if one of the above criteria is written on the face of the prescription?

The pharmacist can enter a "1" in the PA field (461-EU) or a "2" in the submission clarification field (420-DK) to override the PA edit for these medications.

8. Does the pharmacist have to enter the override code at each refill?

Yes, the pharmacist needs to enter an override code at each refill.

9. How are recipients who are exempt from the PA requirement indicated on the claim?

The eligibility file will automatically exempt prescription claims for recipients with a

pink Medicaid identification card (MPW coverage) and recipients who are under 6 years old.

The pharmacist may indicate pregnancy and/or breastfeeding on the claim for recipients with the blue Medicaid identification card in one of the following ways:

- Enter a “2” in the pregnancy indicator field (335-2C)
- Enter a diagnosis of “V22” or “V23” in the diagnosis field (424-DO)

10. Can a prescriber call ACS in the same manner they do with other medications that require PA?

Yes. The prescriber may contact ACS at 866-246-8505 (telephone) or 866-246-8507 (fax) to request PA for these medications.

11. Is it necessary for the prescriber to call ACS and for the pharmacist to override the PA at the pharmacy?

No, if the PA is approved by ACS, the POS override codes will not be needed.

12. Are there any forms required by DMA for this program?

No. There are some forms that have been developed by the Community Care of North Carolina network to assist prescribers in this process that can also serve as a prescription (MD Easy Form). These forms are not required for this program. If a pharmacist does receive these forms, they should make sure that all of the necessary information required in the prescriber’s own handwriting is present on the form.

13. Can a pharmacist take a verbal order over the telephone for a proton pump inhibitor medication?

The pharmacist may receive oral authorization to fill a proton pump inhibitor medication from the prescriber when the patient meets the criteria. The pharmacist should write the qualifying criteria on the prescription and initial it. If a telephone prescription for a proton pump inhibitor medication with the corresponding criteria is accepted, the prescriber must send a new prescription within 72 hours with the qualifying criteria written on the prescription in the prescriber’s own handwriting.

14. Is the documentation of the criteria on the face of the prescription in the prescriber’s own handwriting a requirement if a previous prescription has the documented criteria?

Yes, each prescription, whether a refill authorization or initial prescription, requires the documentation of the criteria on the face of the prescription in the prescriber’s own handwriting.

15. Does documentation of the criteria still have to be in the prescriber’s own handwriting if the prescription is electronic or computer generated?

Yes, each prescription, regardless of the source, requires the documentation of the criteria on the face of the prescription in the prescriber’s own handwriting.

16. If the PA is obtained through ACS, how long is it good for?

12 months